

12/12/00  
jc950 U.S. PTO



12/13/00



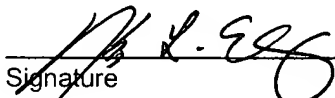
A

Certificate of Mailing	
Date of Deposit <u>December 12, 2000</u>	Label Number: <u>EL509218445US</u>
I hereby certify under 37 CFR 1.10 that this correspondence is being deposited with the United States Postal Service as "Express Mail Post Office to Addressee" with sufficient postage on the date indicated above and is addressed to BOX PATENT APPLICATION, Assistant Commissioner for Patents, Washington, D.C. 20231.	
<u>Guy Beardsley</u> Printed name of person mailing correspondence	<u>Guy Beardsley</u> Signature of person mailing correspondence

jc639 U.S. PTO  
09/735024  
12/12/00

UTILITY PATENT APPLICATION TRANSMITTAL UNDER 37 CFR §1.53(b)	
Attorney Docket Number	08100/003003
Applicant	Brian Seed et al.
Title	METHODS AND COMPOSITIONS FOR THE RAPID AND ENDURING RELIEF OF INADEQUATE MYOCARDIAL FUNCTION
<b>PRIORITY INFORMATION:</b>	
This application is a continuation of and claims priority from United States patent application 09/198,874, filed November 24, 1998, and U.S.S.N. 08/680,684, filed July 17, 1996	
<b>SMALL ENTITY STATUS:</b>	
Applicant claims small entity status under 37 CFR 1.27.	
<b>APPLICATION ELEMENTS:</b>	
Cover sheet	1 page
Specification	29 pages
Claims	8 pages
Abstract	1 page
Drawing	0 sheets
Combined Declaration and POA, which is: <input type="checkbox"/> A copy from prior application 09/198,874 and the entire disclosure of the prior application is considered as being part of the disclosure of this new application and is hereby incorporated by reference therein.	3 pages
Statement Deleting Inventors	
Sequence Statement	
Sequence Listing on Paper	
Sequence Listing on Diskette	
Preliminary Amendment	
IDS	

12/12/00  
jc950 U.S. PTO

Form PTO 1449	
Cited References	
Recordation Form Cover Sheet and Assignment	
Assignee's Statement	
English Translation	
Certified Copy of Priority Document	
Return Receipt Postcard	1
<b>FILING FEES:</b>	
Basic Filing Fee: \$355	
Excess Claims Fee: 57 -20 x \$9	
Excess Independent Claims Fee: 7 -3 x \$40	
Multiple Dependent Claims Fee: \$135	
Total Fees:	\$0
<input checked="" type="checkbox"/> The filing fee is not being paid at this time. <input checked="" type="checkbox"/> Please apply any other charges, or any credits, to Deposit Account No. 03-2095.	
<b>CORRESPONDENCE ADDRESS:</b>	
Karen L. Elbing, Ph.D. Reg. No. 35,238 Clark & Elbing LLP 176 Federal Street Boston, MA 02110	
Telephone: 617-428-0200 Facsimile: 617-428-7045	
 Signature	12 December 2000 Date

\\Ntserver\documents\08100\08100.003003 Continuation Transmittal.wpd